| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 10 | 4-13-01 |
| FORMALITY REVIEW | TH | 9J3 | 05-30-01 |
| RESPONSE FORMALITY REVIEW | ph | 1030 | 7-29-01 |
| | M.H. | 615 | 09-24-01 |

## BEST AVAILABLE COPY INDEX OF CLAIMS

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| ✔ | ............................... Rejected | N | ............................... Non-elected |
| = | ............................... Allowed | I | ............................... Interference |
| — | (Through numeral)... Canceled | A | ............................... Appeal |
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| Claim | | Date | Claim | | Date | Claim | | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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